

Division of Workers Compensation

**KANSAS DEPARTMENT OF LABOR**

800 S.W. Jackson Street, Suite 600, Topeka, KS 66612-1227  
phone – 785-296-3441 • fax – 785-296-8580  
web site – www.dol.ks.gov

**DO NOT WRITE IN THIS SPACE**

Employee's Name:

(first) (middle) (last)

Date of Birth: \_\_\_\_\_ ☐ Male ☐ Female

Social Security Number: \_\_\_\_\_

Address: (Street) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Phone Number: \_\_\_\_\_

Employee E-mail Address: \_\_\_\_\_

**APPLICATION FOR HEARING**

Employer: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_  
(Required)

**ACCIDENTAL INJURY OR OCCUPATIONAL DISEASE**

Date of accident/disease (give beginning and ending dates if a series): \_\_\_\_\_

State specifically the exact cause and source of accident/disease: \_\_\_\_\_

Briefly state extent of injuries or disease claimed: \_\_\_\_\_

In what county did the accident or disease occur? \_\_\_\_\_ At or near which city? \_\_\_\_\_

If accident/disease **did not** happen within Kansas, in which **Kansas** county could hearing be most conveniently held? \_\_\_\_\_

Mediation Requested? ☐ YES ☐ NO

Applicant's Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

**DO NOT WRITE IN THIS SPACE**

Attorney's Signature: \_\_\_\_\_

Attorney's Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_  
(for purposes of hearing notices)

Kansas Supreme Court Number: \_\_\_\_\_

**Federal Privacy Act Disclosure Section 7(a)(2)(B)**

The mandatory requirement that social security numbers be included on forms filed with the Division of Workers Compensation is permitted by Section 7(a)(2)(B) of the Federal Privacy Act of 1974, since our regulations which require its disclosure were in existence before January 1, 1975. The number is used as a means of identifying all the various records in the Division of Workers Compensation pertaining to an individual.

The use of social security numbers is made necessary because of the large number of applicants who have similar names and birth dates, and whose identities can only be distinguished by the social security number.